



DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS

Public Safety Service



AFFIDAVIT FOR FIRE ALARM,
FIRE SUPPRESSION OR FIRE SPRINKLER QUALIFIERS

State of Louisiana

Parish of _____

BEFORE ME, the undersigned Notary Public PERSONALLY CAME AND APPEARED:

(Name of Qualifier)

(Signature of Qualifier)

Who, after being duly sworn, did state as follows: I hereby certify and declare that
I am a paid employee (working a minimum of 32 hours per week) of:

(Name of Firm)

and furthermore, shall not be affiliated with any other company in my fire marshal
licensed capacity as long as I am employed by the aforementioned firm. I will primarily
and actively engage in integrating and direct supervising the certification, inspection,
installation and servicing of those fixed fire extinguishing, fire alarm and/or sprinkler
systems that the above firm designs, sell, installs and services as long as I am employed as
the aforementioned firm's qualifying employee.

Thus done and signed before me on the _____ day of _____, 20____.

_____, No. _____
(NOTARY PUBLIC)